# Speak with a Midwife

**Campaign evaluation** 





## **Campaign summary**

Budget: £33,160 exc VAT

Timescales: March 2023 - January 2024

#### Aim of the campaign

- Develop a local promotional campaign to encourage more pregnant people to be seen by a midwife within 10 weeks of pregnancy.
- This will promote antenatal care beginning at the earliest opportunity and sharing information to support pregnant people to have a healthy pregnancy.



Visit **speakwithamidwife.co.uk** or scan the QR code to book your first care appointment and talk about your options and choices.





### **Campaign objectives**

A campaign **driven by local data and insight** to inform and ensure the campaign is meaningful, representative, and impactful across West Yorkshire and Harrogate.

This will be delivered without blame or judgement. We will be respectful of local beliefs, understanding, and cultures as we endeavour to find out the potential **incentives or motivations** that would encourage more booking by 10 weeks of pregnancy.

The campaign messages will be informed by pregnant people and will be **positive**, **inclusive**, **and accessible** to online and offline audience



# **Campaign stages**

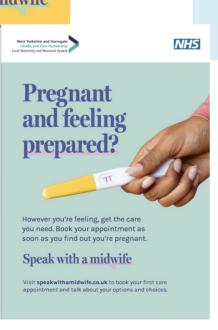
Stage 1	<b>Research and insight</b> - Project research, inception meeting and insight gathering including baseline survey for the evaluation.
Stage 2	Creative campaign development - Interpret any insights into a behavioural diagnostics, target audience mapping, and develop a creative campaign brand and messaging for testing.
Stage 3	<b>Testing and case study recruitment</b> - Rapid messaging and language testing with key audiences. Sourcing and liaising with people to appear in case studies (if this is the desired approach).
Stage 4	Creative and messaging treatment - Creative treatment development in response to testing and development of final campaign lock up.
Stage 5	Creative treatment implementation - Prepare all the campaign materials and campaign toolkit.
Stage 6	Campaign launch - All campaign assets ready.
Stage 7	Evaluation - Full outcome based evaluation with pre and post insight.





# **Campaign creative**







Real life photography

West Yorkshire Health and Care Partnership

**Posters** 

# Part one: Post campaign survey



### Aims of the pre and post survey

We designed a pre and post campaign survey to support the campaign evaluation by giving an indication of **campaign reach**, **ease of understanding** and **likeability** in a sample of target cohorts in West Yorkshire.

Those taking part in the post survey were also asked whether the campaign has increased their understanding of how to book pregnancy care. There are certain caveats due to the study methods being used;

- Depending on the numbers recruited into a pre/post survey, the sample size is unlikely to be representative of the population of women of child bearing age in the region. Therefore, any results from the sample are purely indicative, and would not necessarily be representative of the wider target population in the region.
- The questions are specific to the campaign evaluation and are not a validated tool- which means if asked again to the same group the results may change.
- The campaign materials are not being evaluated as a research intervention but simply to gather feedback which can inform future campaign development. The questions have been chosen with this in mind.







# Survey sample (post campaign survey)\*

Total number of valid	44
responses	[Note. From the 116 pre-campaign survey responses and 45 post-campaign survey responses, only paired data from both surveys counts towards valid responses, i.e., data from respondents who participated in both surveys. One person did not complete all questions on the second survey]
Mean age of respondents	<b>34 years</b> ; ranging from 19 to 58 years
Ethnicity	White British / English / Welsh / Scottish / Northern Irish (84%), Asian/Asian British Indians and Pakistanis (9%), Black/African/Caribbean British (2.3%) and Mixed/Multiple Ethnic groups (4.7%).
Area of residence	Leeds (59%), Kirklees (25%), Bradford (11.5%), Calderdale and others (4.5%).
Employment	95.5% of respondents are currently working.
Language	All respondents' main language was English with 100% indicating that they can speak English 'very well'.

<sup>\*</sup>These are respondents who completed both the pre and post campaign survey







# **Survey findings: Pre-campaign**

**100%** of respondents understood why pregnancy care is important and the benefits it brings to the mother and the baby.

**88%** were sure about what happens during pregnancy care appointments, **7%** were unsure while **5%** did not have an understanding about it.

**93%** knew how to book their first pregnancy care appointment if needed; **7%** did not know.

**86%** knew that it is advised to have the first pregnancy care appointment with a midwife or health professional before 10 weeks of pregnancy, **9.3%** believed in doing so after 10 weeks of pregnancy, and **4.7%** were unsure.

# **Survey findings: Post-campaign**

**20.5%** of respondents had seen the campaign adverts, posters or other materials.

58.8% had come across the campaign on social media sites (Twitter and Facebook)

17.7% on TV screens in the doctors surgery and hospitals

11.8% by reading posters and leaflets

11.8% had heard about it from friends

**68.29%** liked how the campaign looked while **20.5%** were unsure about it.

**56%** found the campaign helpful in understanding how a first pregnancy care appointment is booked if needed

**73%** found the campaign helpful in understanding when a first pregnancy care appointment should be booked

75% of respondents reported that this campaign would encourage them to book an appointment with a midwife or health professional early in pregnancy if they found out that they were pregnant



### **Survey findings: Participant feedback**

#### **Accessibility:**

"I like the QR code; it helps with accessibility. Possibly having some in different languages and large print may help some communities of people."

#### Location/information clarification:

"I really like the campaign, though some people may not understand the best 'place' listed. For example, I know that I would fall under Leeds Teaching Hospitals, but would everyone know their local Trust/area? Would it be best to add a postcode for example, if you live in an LS postcode, contact your GP. If you live in a WF postcode, contact your community midwife."

#### How to book an appointment:

"GPs tend to not want to book in for you. Campaign should state WHO to book with (midwife) and HOW as GP receptionist laughed when I told her I was 5 weeks pregnant and needed an appointment. Campaign could also mention to register on my pregnancy notes pre 10 weeks."

"I really like the summary pathway but it doesn't tell you how to contact your midwife if you don't have access to the internet or prefer talking on the phone. Or if you can just do it through your GP"

"It doesn't make clear that you can't 'book' the appointment, you register your pregnancy and wait for them to contact you and this can involve a wait. It also doesn't make clear the appointment needs to happen by the 8th week of pregnancy."

"Info on booking just says speak to a midwife - nothing about how you are actually meant to contact one or where to find contact details. The last page had a section 'your postnatal care' but was talking about a blood test for baby and registering baby not the woman's care - it was confusing that this wasn't in the same section as the rest of the baby's post birth care and also highlighted the fact there was no info on the woman's postnatal care."

### Post survey analysis

#### Look and Feel:

There was overall positive feedback for the general look and feel of the campaign.

#### Messaging:

The 'when' message is strong - people understood the importance of booking to see a midwife in early pregnancy, and by how many weeks.

The survey findings indicate the **'how'** message may need developing further - the results indicated lower numbers of people who understood the booking process, and we had many comments on the survey linked to this. This may be because of the variations in process between different areas and practices. Our findings could indicate this is an important area of messaging to consider to address a potential barrier to women booking that early appointment.

#### Media reach:

The greatest reach for the campaign came from digital media, which would reflect the activity that has been completed as part of this work. Women may not have seen the print materials in GP practices if they haven't visited their local practice during the campaign period.



# Part two: Digital campaign - evaluation/metrics

### **Glossary of digital terms**

- Reach the number of people who saw the ad
- Impressions the number of times the ad entered a person's screen (the same person can see the ad multiple times)
- CPC Cost per link click the price you pay for each click on your ad to the landing page
- CTR (link clicks) Click through rate how many times users clicked on your ad after it's been displayed to them, expressed in percentages (clicks compared to impressions)
- CTR (all) Click through rate (as above), but in relation to all clicks on the ad, not
  just clicks to the website, ie clicks to the Facebook page, commenting, reacting,
  expanding photos to full screen etc
- CPM Cost per 1000 impressions the price you pay for 1,000 impressions on your
   ad
- Frequency the average number of times the same person sees your ad
- 2, 15, 30 second video views/video plays at 50% The number of times the video in the ad is played for that length of time (ie for 15 seconds or for 50% of the video)
- Video completions The number of times your video was played to completion







#### Meta ads

Link clicks	2,169
Reach	87,390
Impressions	395,322
Cost per link click	£0.37
CTR (link clicks)	0.55%
CTR (all)	1.01%
Cost per 1000 impressions	£2.02
Frequency	4.52

Post engagements	3,351
Post comments	4
Post reactions	86
Post saves	7
Post shares	11

The ads performed well and drove traffic to the landing page, and reached a broad audience, in a cost effective way. Since the midway review, the campaign almost double in link clicks, showing that it maintained consistent high performance.

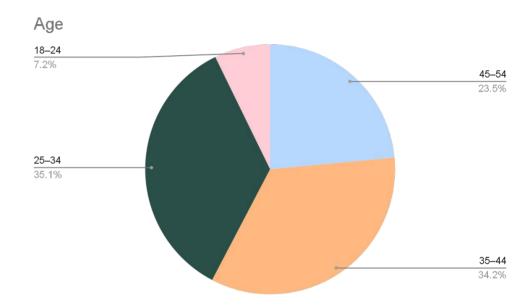
The ads also reached an extra 32.7k people within our target audience from the midway point and the CPC reduced from £0.38 to £0.37. The cost per 1000 impressions also reduced by 25p.

The cost per click is over **50% cheaper** than Facebook's average CPC. The cost per 1000 people reached is also **cheaper than average** and there is a **strong level engagement** from the audience reached. The post has been shared with people's friends and saved for future reference by some people within the target audience.

Frequency refers to how many times an advertisement gets shown to a single user. A frequency over 4 could lead to creative fatigue, which occurs when your audience has seen the same ad too often. The frequency increased by the end of the campaign from 3.46 to 4.52, showing that the budget was optimal and we had exhausted our target audience. Therefore, if campaign length or budget would have been increased it would have been unlikely to have a significant impact.

# Age/gender

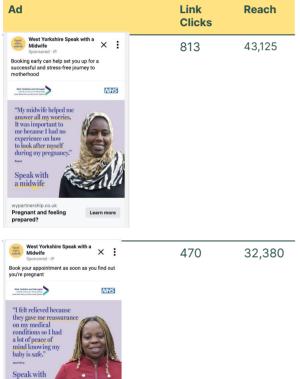
The audience reached is **100% female**, as targeted, and a **board mix of ages** have engaged with the ads. Since the midway review, the age split hasn't changed significantly, with **25-34** still being the primary audience, but this has decreased slightly with more focus on the **45-54** age group.

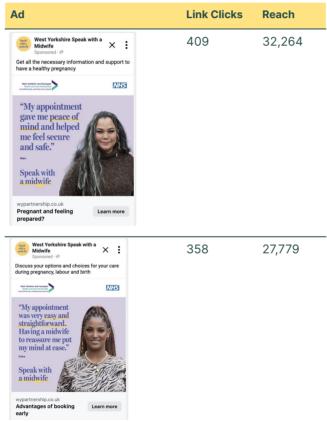


# Platform/placement

Platform	Link Clicks
Facebook	2004
Audience Network	129
Instagram	35
Messenger	1

The primary platform that the ads have been successful on is **Facebook**. On Facebook, these ads have mainly been appearing on the **feed placement** such as the video feed. This shows the importance of using video content and the potential impact of video content.





The ad with the copy "My midwife helped me answer all my worries..." has performed the best with 813 clicks. It appears that the representation of the woman in this advert has been effective for it's reach due to the levels of engagement and comments in different languages.

This is followed by the message 'I felt relieved because they gave me reassurance...', but this received over 370 fewer clicks.

Start your pregnancy care

### **Learnings/Optimisations**

- Due to the small audience size, the targeting approach needed to be changed from retargeting people who engaged with the previous campaign, to women in West Yorkshire. This is a key learning that the audience size for this campaign is not large enough for retargeting strategies.
- The ads were successful in reaching a high proportion of our target audience and encouraging them to engage, therefore driving traffic to the landing page
- The ads were cost effective for reach and traffic, by achieving low CPC and CPM and high CTR
- The ads were engaged with through comments, sharing and saving. We received messages to the page from pregnant people asking relevant questions showing that the ads are reaching our desired audience and that we were able to support expecting parents
- The budget is optimal for this audience size as shown through the frequency result. An increase in budget would've likely resulted in an increase in frequency, which would cause creative fatigue.
- The budget was front-loaded to allow for insight gathering and user testing, but this was a limitation when it came to roll out of the campaign on a regional scale.
- The ads have been mainly reached by ages 25-34, but there is similar level of engagement from other age brackets. Other platforms
  could possibly be tested in the future, such as TikTok, in order to reach a younger audience.
- As the video feed placement was successful, video content should be prioritised and tested in the future rather than static graphics.







